

TACTICAL RESPONSE REPORT/Chicago Police Department

1. DATE OF INCIDENT 13-SEP-2014		2. ADDRESS OF OCCURRENCE 22:12:00 2349 W LAKE ST CHICAGO, IL 60612		3. LOCATION CODE 304		4. BEAT/OCCUR 1223											
5. POSITION 9161		6. LAST NAME MATEO		7. FIRST NAME ERIC O		8. STAR NO 11782		9. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F		10. RACE CODE S		11. AGE [REDACTED]		12. HT. 506		13. WT. 136	
14. DATE OF APPT 26-JUN-2006		15. EMPLOYEE NO [REDACTED]		16. UNIT & BEAT OF ASSIGNMENT 393 6744A		17. DUTY STATUS <input checked="" type="checkbox"/> On <input type="checkbox"/> Off		18. MEMBER INJURED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		19. MEMBER IN UNIFORM? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
20. LAST NAME FORD		21. FIRST NAME DENZEL		22. M.I. [REDACTED]		23. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F		24. RACE BLK		25. D.O.B. [REDACTED]		26. HT. 600		27. WT. 220			
28. ADDRESS [REDACTED]		29. TELEPHONE NO. [REDACTED]		30. WAS SUBJECT ARMED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		31. SUBJECT INJURED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		32. SUBJECT ALLEGED INJURY? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
33. WHERE WAS MEDICAL TREATMENT OBTAINED? [REDACTED]		34. BY WHOM? [REDACTED]		35. CONDITION <input checked="" type="checkbox"/> Hospitalized <input type="checkbox"/> Apparently Normal <input type="checkbox"/> Under Influence <input type="checkbox"/> Refused Medical Aid		36. CHARGE(S) PLACED [REDACTED]		37. CB NO 18974714		38. IR NO. [REDACTED]							
39. DNA <input type="checkbox"/>		SUBJECTS ACTIONS		ACTIVE REGISTER		ASSAULT/ASSAULT		ASSAULT/BATTERY		ASSAULT/DEADLY FORCE							
MEMBER'S RESPONSE		PASSIVE REGISTER		FLED		IMMINENT THREAT OF BATTERY		ATTACK WITH WEAPON		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM							
		STIFFENED (DEAD WEIGHT)		PULLED AWAY		OTHER		ATTACK WITHOUT WEAPON		WEAPON							
		OTHER		OTHER		OTHER		OTHER		OTHER							
		MEMBER PRESENCE		OPEN HAND STRIKE		ELBOW STRIKE		KNEE STRIKE		FIREARM							
		VERBAL COMMANDS		TAKE DOWN / EMERGENCY		CLOSED HAND STRIKE/PUNCH		KICKS		OTHER							
		ESCORT HOLDS		OC CHEMICAL WEAPON		IMPACT WEAPON (Describe in Box 40)		IMPACT MUNITION (Describe in Box 40)									
		WRISTLOCK		CANINE													
		ARMBAR		TASER (Proton Discharge)													
		PRESSURE SENSITIVE AREAS		TASER (Contact Stun)													
		CONTROL INSTRUMENT		TASER (Linear Targeted)													
		OC/CHEMICAL WEAPON WAIVER/NOTIFICATION		TASER (Spark Displayed)													
		OTHER		OTHER													
40. ADDITIONAL INFORMATION SUBJECT RAMMED MEMBER'S VEHICLE WHICH INJURED MEMBER																	
41. WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input checked="" type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER		42. INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors		43. LIGHTING CONDITIONS <input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input checked="" type="checkbox"/> 06 Good Artificial		44. WEATHER CONDITIONS CLEAR											
45. MAKE/MANUFACTURER BLOCK, INC.-AU-		46. MODEL 22		47. BARREL LENGTH 4.50		48. CALIBER/GAUGE 40 S&W											
49. TASER PART ID NO. [REDACTED]		50. WEAPON SERIAL NO. (Include Letters) PEL142		51. CHICAGO GUN REG. NO. R0138925		52. IL FIREARM OWNER ID NO. [REDACTED]		53. HANDGUN CERTIFICATE NO. [REDACTED]									
54. SPECIAL WEAPON CERTIFICATE NO. [REDACTED]		55. PROPERTY INVENTORY NO. [REDACTED]		56. TYPE OF AMMUNITION USED Department Issued		57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER 1		58. TOTAL NO. OF SHOTS MEMBER FIRED 7									
59. WHO FIRED FIRST SHOT <input type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input checked="" type="checkbox"/> 03 OTHER (Specify) MEMBER'S PARTNER		60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO		61. NO. OF CARTRIDGES/SHOT SHELLS RELOADED 0		62. HOW WAS MEMBER'S HANDGUN WORK <input checked="" type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify)		63. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO									
64. HOW WAS MEMBER'S HANDGUN DRAWN <input checked="" type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify)		65. SPECIFY METHOD/EQUIPMENT USED TO RELOAD DNA		66. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT <input checked="" type="checkbox"/> 02 05 - 10 FT <input type="checkbox"/> 03 10 - 15 FT <input type="checkbox"/> 04 OVER 15 FT		67. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBER'S WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input checked="" type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN		68. POSITION OF MEMBER DISCHARGING WEAPON <input checked="" type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (Specify)									
70. EVENT NO 1425616167																	
71. RD. NO HX427436																	
72. CASE INFO		NOTIFICATIONS (OC OR TASER INCIDENT): <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR		NOTIFICATIONS (FIREARM INCIDENT): <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR <input checked="" type="checkbox"/> OP COMMAND <input checked="" type="checkbox"/> DET. DIV.		Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.											
73. REPORTING MEMBER (Print Name) MATEO, ERIC O		STAR/EMPLOYEE NO 11782		SIGNATURE [REDACTED]													
74. REVIEWING SUPERVISOR (Print Name) FORBES JR, TERENCE P		STAR NO. 1432		SIGNATURE [REDACTED]		DATE REVIEWED 14-SEP-2014 05:12:55		TIME									

1071524
#26

WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM, 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR, 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE AOS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING, 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON, 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON, 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HEREIN, 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☐ REFUSED

☒ UNABLE TO INTERVIEW (Specify Reason)

Subject hospitalized and unable to interview

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

Based on the information available at the time of this report, it is the preliminary determination of the undersigned that Ofc. Mateo, Eric #11782, acted in compliance with Department Policy. Ofc. Wesselhoff was knocked to the ground, when Offender Ford, Denzel IR#2078314, rammed his vehicle into Ofc. Wesselhoff's vehicle which in turn struck Ofc. Wesselhoff. Ford then reversed his vehicle ramming a second vehicle in and attempt to flee. Ofc. Wesselhoff was on the ground and unable to move and in the direct path of Ford's only escape route thus placing him in fear of his life. Ofc. Mateo fearing for his life and also the life of Ofc. Wesselhoff fired his weapon. Log#1071524 U#14-31

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. 1071524 OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)

RUIZ, BERSCOTT F

SIGNATURE

DATE COMPLETED

TIME

14-SEP-2014 05:33:52

79. DISTRIBUTION OF ORIGINAL TTR:

A TTR PACKET, INCLUDING THE TTR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS PHOTO COPIES OF

☐ SUPPLEMENTARY REPORT

☐ I/O REPORT

80. TOTAL TTRs THIS EVENT No.

☐ CASE REPORT

☒ OFFICER BATTERY REPORT

☐ CRIMINATION REPORT

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☐ ARREST REPORT

☐ 10-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESSES

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